Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF MICHIGAN		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

# Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.	Nathan First name  Edmond Middle name  Curtis Last name and Suffix (Sr., Jr., II, III)	Eisa First name  Marie-Rapson Middle name  Curtis Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-0870	xxx-xx-5450

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	■ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live	32012 Bradner Dr	If Debtor 2 lives at a different address:
		Warren, MI 48088  Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Macomb	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

	otor 1 Nathan Edmond ( Lisa Marie-Rapso					Case number (if known)
Par	t 2: Tell the Court About	Your Bank	ruptcy C	ase		
7.	The chapter of the Bankruptcy Code you are	Check on (Form 20		brief description of each, see <i>No</i> , go to the top of page 1 and che		by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy riate box.
	choosing to file under	■ Chap	er 7			
		☐ Chapt	er 11			
		☐ Chapt	er 12			
		☐ Chapt	er 13			
8.	How you will pay the fee	abo ord a p ☐ I ne	out how your er. If your re-printed page to pa	ou may pay. Typically, if you are attorney is submitting your payn address.  y the fee in installments. If you	paying the feet nent on your b choose this o	heck with the clerk's office in your local court for more details e yourself, you may pay with cash, cashier's check, or money behalf, your attorney may pay with a credit card or check with option, sign and attach the <i>Application for Individuals to Pay</i>
		☐ I re but app	quest the is not rec olies to yo	luired to, waive your fee, and ma ur family size and you are unable	equest this op y do so only if e to pay the fe	otion only if you are filing for Chapter 7. By law, a judge may, f your income is less than 150% of the official poverty line that be in installments). If you choose this option, you must fill out Official Form 103B) and file it with your petition.
9.	Have you filed for bankruptcy within the	■ No.				
	last 8 years?	☐ Yes.				
			District	\	When	Case number
			District	\	Vhen	Case number
			District	\	When	Case number
10.	Are any bankruptcy	■ No				
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.				
			Debtor			Relationship to you
			District	\	Vhen	Case number, if known
			Debtor			Relationship to you
			District	\	When	Case number, if known
11.		■ No.	Go to	line 12.		
	residence?	☐ Yes.	Has yo	our landlord obtained an eviction	judgment aga	ainst you?
				No. Go to line 12.		
				Yes. Fill out <i>Initial Statement Al</i> this bankruptcy petition.	bout an Eviction	on Judgment Against You (Form 101A) and file it as part of

	otor 2				Case number (if known)
Par	t 3: Report About Any Bu	ısinesses	You Owi	n as a Sole Propriet	tor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	e and location of bus	iness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numl	oer, Street, City, Stat	e & ZIP Code
	it to this petition.		Chec	k the appropriate bo	x to describe your business:
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))
				Commodity Broke	r (as defined in 11 U.S.C. § 101(6))
				None of the above	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	s. If you in ns, cash-f S.C. 1116	ndicate that you are allow statement, and f (1)(B).	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	No.	I am	not filing under Chap	iter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	Have Any	/ Hazard	ous Property or An	y Property That Needs Immediate Attention
14.	Do you own or have any property that poses or is	■ No.			
	alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?	
	public health or safety? Or do you own any property that needs immediate attention?			diate attention is why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where i	s the property?	
	<b>3</b>				Number, Street, City, State & Zip Code

### Part 5:

#### Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

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If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

page 5

	otor 1 Nathan E otor 2 Lisa Mari					Case number	(if known)
Par	t 6: Answer The	se Questio	ons for Re	porting Purposes			
	What kind of dek	ots do		Are your debts primarily coindividual primarily for a pers			ed in 11 U.S.C. § 101(8) as "incurred by an
				☐ No. Go to line 16b.			
				Yes. Go to line 17.			
				Are your debts primarily but money for a business or inve			
				☐ No. Go to line 16c.			
				☐ Yes. Go to line 17.			
			16c.	State the type of debts you o	we that are not consu	mer debts or business	debts
17.	Are you filing un Chapter 7?	der	□ No.	I am not filing under Chapter	7. Go to line 18.		
	Do you estimate after any exempt property is exclu administrative ex	: ided and		are paid that funds will be av			rty is excluded and administrative expenses
	are paid that fun			■ No			
	be available for distribution to un creditors?	nsecured		□ Yes			
18.	How many Credi		<b>1</b> -49		<b>1</b> ,000-5,000	)	<b>2</b> 5,001-50,000
	you estimate that owe?	t you	□ 50-99		5001-10,00		☐ 50,001-100,000
			☐ 100-19 ☐ 200-99		☐ 10,001-25,0	000	☐ More than100,000
19.	How much do yo		□ \$0 - \$5	0,000	□ \$1,000,001	- \$10 million	☐ \$500,000,001 - \$1 billion
	estimate your as be worth?	sets to		1 - \$100,000	\$10,000,00		□ \$1,000,000,001 - \$10 billion
				01 - \$500,000 01 - \$1 million		1 - \$100 million 01 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion
20.	How much do yo		□ \$0 - \$5	0,000	□ \$1,000,001	- \$10 million	□ \$500,000,001 - \$1 billion
	estimate your lia to be?	bilities	+ ,	01 - \$100,000	□ \$10,000,00°		□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion
				01 - \$500,000 01 - \$1 million		1 - \$100 million 01 - \$500 million	☐ More than \$50 billion
			Φ ψ000,0	01		· 	·
	t 7: Sign Below						
For	you			•	. ,	, ,	ation provided is true and correct.
							under Chapter 7, 11,12, or 13 of title 11, cose to proceed under Chapter 7.
				ney represents me and I did r , I have obtained and read th			an attorney to help me fill out this
			I request r	elief in accordance with the c	chapter of title 11, Unit	ed States Code, spec	ified in this petition.
				y case can result in fines up t			property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519,
		-	/s/ Natha	n Edmond Curtis		/s/ Lisa Marie-Ra	
				Edmond Curtis of Debtor 1		Lisa Marie-Rapso Signature of Debtor	
			Executed	on May 7, 2019 MM / DD / YYYY			7 <b>, 2019</b> 7 DD / YYYY

Debtor 1 Debtor 2	Nathan Edmond ( Lisa Marie-Rapso		Cas	se number (if known)	
epresent	attorney, if you are ed by one	I, the attorney for the debtor(s) named in this petitic under Chapter 7, 11, 12, or 13 of title 11, United St for which the person is eligible. I also certify that I	ates Code, and have have delivered to the	explained the relief and debtor(s) the notice r	vailable under each chapter equired by 11 U.S.C. § 342(b)
	not represented by ey, you do not need spage.	and, in a case in which § 707(b)(4)(D) applies, cert schedules filed with the petition is incorrect.	tify that I have no know	vledge after an inquir	y that the information in the
	. 0	/s/ Peter A. Behrmann	Date	May 7, 2019	
		Signature of Attorney for Debtor		MM / DD / YYYY	
		Peter A. Behrmann			
		Printed name			
		UpRight Law PLLC			
		Firm name			
		37699 Six Mile			

Suite 250 Livonia,, MI 48152

Number, Street, City, State & ZIP Code Contact phone **(734) 259-2947** Behrmann.peter@gmail.com Email address P71582 - Michigan MI Bar number & State

Fill i	this information to identify your case:		
Debt			
Debt	First Name Middle Name Last Name		
	Dr 2 Lisa Marie-Rapson Curtis  ie if, filing) First Name Middle Name Last Name		
Unite	d States Bankruptcy Court for the: EASTERN DISTRICT OF MICHIGAN		
Case	number		
(if kno	vn)	_	ck if this is an ended filing
	cial Form 106Sum		
	nmary of Your Assets and Liabilities and Certain Statistical Information		12/15
inforr	complete and accurate as possible. If two married people are filing together, both are equally responsible fon nation. Fill out all of your schedules first; then complete the information on this form. If you are filing amende original forms, you must fill out a new Summary and check the box at the top of this page.  Summarize Your Assets		
ran			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	150,880.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	33,028.07
	1c. Copy line 63, Total of all property on Schedule A/B	\$	183,908.07
Part	2: Summarize Your Liabilities		
			liabilities int you owe
	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	138,309.00
	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	48,958.99
	Your total liabilities	\$	187,267.99
Part	3: Summarize Your Income and Expenses		
	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	4,808.87
	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,771.56
Part	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other s	chedules.
7.	■ Yes What kind of debt do you have?		

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information page 1 of 2

Debtor 1	Nathan Edmond Curtis
Debtor 2	Lisa Marie-Rapson Curtis

Case number (if known)

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

8,441.17

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

	Nathan Edmo	nd Curtic					
Debtor 1	First Name		Name	Last Name			
Debtor 2	Lisa Marie-Ra	pson Curtis					
Spouse, if filing)	First Name	Middle	Name	Last Name			
Jnited States	s Bankruptcy Court for t	he: EASTERN	DISTRI	CT OF MICHIGAN			
Case numbe	r						☐ Check if this is a
	'						amended filing
Official	Form 106A/B						
ched	ule A/B: Pr	opertv					12/15
			an asset	only once. If an asset fits in more than	one category	v. list the asset in	
	or have any legal or equ	itable interest in a	ny resid	lence, building, land, or similar property	?		
■ Yes. Wh	o Part 2. ere is the property?						
Yes. Wh		iption		Duplex or multi-unit building	the amo	ount of any secure	aims or exemptions. Put d claims on Schedule D: ms Secured by Property.
Yes. Wh	ere is the property?  Bradner Dr.	iption		Single-family home Duplex or multi-unit building Condominium or cooperative	the ame	ount of any secure rs Who Have Clair	d claims on Schedule D: ms Secured by Property.
Yes. Who	ere is the property?  Bradner Dr.  Iress, if available, or other descr	ription 48088-0000	_ 	Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home	the ame Credito	ount of any secure	d claims on Schedule D:
Yes. Who	ere is the property?  Bradner Dr.  Iress, if available, or other descr			Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home	Curren	ount of any secure rs Who Have Clair t value of the	d claims on Schedule D: ms Secured by Property.  Current value of the
Yes. Who	ere is the property?  Bradner Dr.  Iress, if available, or other descr	48088-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	Curren entire	t value of the property?  \$150,880.00	d claims on Schedule D: ms Secured by Property.  Current value of the portion you own? \$150,880.06
Yes. Who	ere is the property?  Bradner Dr.  Iress, if available, or other descr	48088-0000		Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other	Curren entire p  Descrii (such a	t value of the property? \$150,880.00  be the nature of yas fee simple, ten	d claims on Schedule D: ms Secured by Property.  Current value of the portion you own?
Yes. Who	ere is the property?  Bradner Dr.  Iress, if available, or other descr	48088-0000		Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other  has an interest in the property? Check or	Curren entire p  Descrii (such a	t value of the property?  \$150,880.00  be the nature of y	d claims on Schedule D: ms Secured by Property.  Current value of the portion you own? \$150,880.0
Yes. What is a second of the s	Bradner Dr.  Iress, if available, or other descr	48088-0000		Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other  has an interest in the property? Check or Debtor 1 only	Curren entire p  Descrii (such a	t value of the property? \$150,880.00  be the nature of yas fee simple, ten	d claims on Schedule D: ms Secured by Property.  Current value of the portion you own? \$150,880.0
Yes. Who	Bradner Dr.  Iress, if available, or other descr	48088-0000		Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other  has an interest in the property? Check or Debtor 1 only Debtor 2 only	Curren entire p  Descrii (such a a life es	t value of the property? \$150,880.00 be the nature of yas fee simple, ten state), if known.	d claims on Schedule D: ms Secured by Property.  Current value of the portion you own? \$150,880.0  rour ownership interest ancy by the entireties, o
Yes. Who	Bradner Dr.  Iress, if available, or other descr	48088-0000		Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other  has an interest in the property? Check or Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Curren entire p  Descrii (such a a life ea	t value of the property? \$150,880.00 be the nature of yas fee simple, ten state), if known.	d claims on Schedule D: ms Secured by Property.  Current value of the portion you own? \$150,880.0
Yes. Who	Bradner Dr.  Iress, if available, or other descr	48088-0000		Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other  has an interest in the property? Check or Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Curren entire p  Descril (such a a life ex	t value of the property? \$150,880.00  be the nature of yes fee simple, ten state), if known.	d claims on Schedule D: ms Secured by Property.  Current value of the portion you own? \$150,880.0  rour ownership interest ancy by the entireties, o
Yes. What is a second of the s	Bradner Dr.  Iress, if available, or other descr	48088-0000		Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other  has an interest in the property? Check or Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another r information you wish to add about this	Curren entire p  Descril (such a a life ex	t value of the property? \$150,880.00  be the nature of yes fee simple, ten state), if known.	d claims on Schedule D: ms Secured by Property.  Current value of the portion you own? \$150,880.0  rour ownership interest ancy by the entireties, o

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Debt Debt		Nathan Edm Lisa Marie-F	nond Curtis Rapson Curtis	Cas	se number (if known)	
3. <b>C</b> a	ırs, vans	s, trucks, trac	tors, sport utility ve	hicles, motorcycles		
	No					
	Yes					
3.1	Make: Model:	Chrysler Sebring		Who has an interest in the property? Check one ☐ Debtor 1 only	the amount of any se	od claims or exemptions. Put cured claims on <i>Schedule D:</i> Claims Secured by Property.
		2008  cimate mileage: nformation:	112000	<ul> <li>□ Debtor 2 only</li> <li>■ Debtor 1 and Debtor 2 only</li> <li>□ At least one of the debtors and another</li> </ul>	Current value of the entire property?	Current value of the portion you own?
	Fair C	Condition		☐ Check if this is community property (see instructions)	\$3,500.0	93,500.00
3.2	Make: Model: Year:	GMC Acadia 2010		Who has an interest in the property? Check one  Debtor 1 only	the amount of any se Creditors Who Have	ed claims or exemptions. Put cured claims on Schedule D: Claims Secured by Property.
		imate mileage:	110000	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Other i	nformation:		At least one of the debtors and another		
	Fair C	Condition		☐ Check if this is community property (see instructions)	\$10,000.0	910,000.00
5 <b>A</b>				n for all of your entries from Part 2, including any		\$13,500.00
.p.		u nave allacii	ed for Fart 2. Write	mat number nere		
			onal and Household Ite legal or equitable in	ems terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
<i>E</i> :	xamples No	d goods and to the second second and the second and	furnishings nces, furniture, linens	, china, kitchenware		
			Common House worth more than	ehold Goods & Furnishings with no single in \$625.00	tem	\$4,000.00
E:	No	: Televisions a	and radios; audio, vide I phones, cameras, m	eo, stereo, and digital equipment; computers, printer ledia players, games	s, scanners; music colle	ections; electronic devices
			Common Electr	onics with no single item worth more than	\$625.00	\$1,000.00
				<del>-</del>		

		In Edmond Curtis Marie-Rapson Curtis Case number (if known)	
8.	othe	ralue ues and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin collections, memorabilia, collectibles	, or baseball card collections;
	■ No □ Yes. Describ	e	
9.	Examples: Spor mus	ports and hobbies is, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes cal instruments	and kayaks; carpentry tools;
	■ No □ Yes. Describ	e	
10	. <b>Firearms</b> <i>Examples:</i> Pis	ols, rifles, shotguns, ammunition, and related equipment	
	■ No □ Yes. Describ	e	
11	. Clothes  Examples: Eve  No  Yes. Describ	ryday clothes, furs, leather coats, designer wear, shoes, accessories e	
		Men's Clothing, Accessories, & Shoes	\$500.00
		Women's Clothing, Accessories, & Shoes	\$500.00
12	<ul><li>Jewelry</li></ul>	ryday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, e  Men's Real & Costume Jewelry	gold, silver \$100.00
		Women's Real & Costume Jewelry	\$300.00
13	s. Non-farm anim Examples: Dog □ No ■ Yes. Describ	e	
		2 dogs	\$2.00
14	■ No	onal and household items you did not already list, including any health aids you did not list	
1		r value of all of your entries from Part 3, including any entries for pages you have attached ite that number here	\$6,402.00
		ur Financial Assets	
D	o you own or ha	ve any legal or equitable interest in any of the following?	Current value of the portion you own?  Do not deduct secured claims or exemptions.

Debtor 1 Debtor 2		Nathan Edmond Cur Lisa Marie-Rapson (		Case number (if known)	Case number (if known)			
☐ No		oles: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition						
	100			Cash	\$10.00			
17.				ounts; certificates of deposit; shares in credit unions, brokerage houses, and others with the same institution, list each.	er similar			
	Yes			Institution name:				
		17.1.	Checking	Huntington Bank	\$8.74			
18.	Examp ■ No	,	nt accounts with bro	okerage firms, money market accounts				
			Institution or issuer					
19.		ublicly traded stock and i renture	nterests in incorp	orated and unincorporated businesses, including an interest in an LLC, pa	rtnership, and			
		Give specific information a	about them	 % of ownership:				
20.	Negoti Non-ne ■ No	iable instruments include p egotiable instruments are t Give specific information a	ersonal checks, cas hose you cannot tra	otiable and non-negotiable instruments shiers' checks, promissory notes, and money orders. ansfer to someone by signing or delivering them.				
21.		ment or pension account	s	103(b), thrift savings accounts, or other pension or profit-sharing plans				
	Yes.	List each account separate	ely. of account:	Institution name:				
		401K		State of Michigan 401K	\$1,232.74			
		401K		FleetPride 401K	\$6,274.01			
22.	Your s		s you have made so	o that you may continue service or use from a company public utilities (electric, gas, water), telecommunications companies, or others				
	■ No □ Yes.			Institution name or individual:				
23.	_	ies (A contract for a period	lic payment of mone	ey to you, either for life or for a number of years)				
	■ No □ Yes	lssuer name	e and description.					
24.		ts in an education IRA, in C. §§ 530(b)(1), 529A(b), a		ualified ABLE program, or under a qualified state tuition program.				
	■ No □ Yes		. , , ,	n. Separately file the records of any interests.11 U.S.C. § 521(c):				

	ebtor 1 ebtor 2	Lisa Marie-Rapson Curtis	S	Case number (if known)	
25	. Trusts,	equitable or future interests	in property (other than anythir	g listed in line 1), and rights or powers exerci	sable for your benefit
	■ No □ Yes.	Give specific information about	them		
26			de secrets, and other intellectuebsites, proceeds from royalties a		
	☐ Yes.	Give specific information about	them		
27		es, franchises, and other generales: Building permits, exclusive		n holdings, liquor licenses, professional licenses	
	_	Give specific information about	them		
M	loney or I	property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28		unds owed to you			
	■ No □ Yes.	Give specific information about	them, including whether you alre	eady filed the returns and the tax years	
29	■ No		ony, spousal support, child supp	ort, maintenance, divorce settlement, property se	ttlement
30	Examp  ☐ No	imounts someone owes you iles: Unpaid wages, disability in benefits; unpaid loans you		efits, sick pay, vacation pay, workers' compensa	ntion, Social Security
			Funds Garnished from De & Associates	btors in the last 90 days by Berndt	\$5,600.58
31	Examp ■ No	ts in insurance policies les: Health, disability, or life ins Name the insurance company of Company	of each policy and list its value.	HSA); credit, homeowner's, or renter's insurance Beneficiary:	Surrender or refund value:
32	If you a someo		you from someone who has die st, expect proceeds from a life in	ed isurance policy, or are currently entitled to receive	e property because
33			r or not you have filed a lawsu putes, insurance claims, or rights	it or made a demand for payment s to sue	
	_	Describe each claim			
34	_	ontingent and unliquidated c	laims of every nature, includin	g counterclaims of the debtor and rights to se	et off claims
	■ No □ Yes.	Describe each claim			

Deb Deb			Case number (if known)	
	Any financial assets you did not already list No Yes. Give specific information			
36.	Add the dollar value of all of your entries from Part 4, including for Part 4. Write that number here			\$13,126.07
Part	5: Describe Any Business-Related Property You Own or Have an Intere	st In. List any real esta	ate in Part 1.	
37. D	o you own or have any legal or equitable interest in any business-related	d property?		
	No. Go to Part 6.			
	Yes. Go to line 38.			
Part	Describe Any Farm- and Commercial Fishing-Related Property You ( If you own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
46. <b>[</b>	Do you own or have any legal or equitable interest in any farm-	or commercial fishin	g-related property?	
	No. Go to Part 7.			
	☐ Yes. Go to line 47.			
Part	7: Describe All Property You Own or Have an Interest in That You	Did Not List Above		
	Oo you have other property of any kind you did not already list? Examples: Season tickets, country club membership			
	No			
	Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write tha	t number here		\$0.00
Part	List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$150,880.00
56.	Part 2: Total vehicles, line 5	\$13,500.00		
57.	Part 3: Total personal and household items, line 15	\$6,402.00		
58.	Part 4: Total financial assets, line 36	\$13,126.07		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$33,028.07	Copy personal property total	\$33,028.07
63.	Total of all property on Schedule A/B. Add line 55 + line 62		-	\$183,908.07

Debtor 1	Nathan Edmond	Curtis		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F MICHIGAN	
(if known)				☐ Check if this is a amended filing

Part 1: Identify the Property You Claim as Exempt

# Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemptions are you claiming	hich set of exemptions are you claiming? Check one only, even if your spouse is filing with you.							
	☐ You are claiming state and federal nonbar	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)					
	■ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)							
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.								
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption				
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.					
D	ebtor 1 Exemptions 32012 Bradner Dr. Warren, MI 48088 Macomb County	\$150,880.00		\$20,880.00	11 U.S.C. § 522(d)(1)				
	Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit					
	Common Household Goods &	\$4,000.00		\$2,000.00	11 U.S.C. § 522(d)(3)				
	Furnishings with no single item worth more than \$625.00 Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit					
	Common Electronics with no single item worth more than \$625.00	\$1,000.00		\$500.00	11 U.S.C. § 522(d)(3)				
	Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit					
	Men's Clothing, Accessories, & Shoes	\$500.00		\$500.00	11 U.S.C. § 522(d)(3)				
	Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit					
	Men's Real & Costume Jewelry Line from Schedule A/B: 12.1	\$100.00		\$100.00	11 U.S.C. § 522(d)(4)				
	Line Ironi Scheaule A/B: 12.1			100% of fair market value, up to any applicable statutory limit					

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 4

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption	
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
2 dogs Line from Schedule A/B: 13.1	\$2.00		\$1.00	11 U.S.C. § 522(d)(3)	
			100% of fair market value, up to any applicable statutory limit		
Cash Line from Schedule A/B: 16.1	\$10.00		\$5.00	11 U.S.C. § 522(d)(5)	
Line non Schedule A/D. 10.1			100% of fair market value, up to any applicable statutory limit		
Checking: Huntington Bank Line from Schedule A/B: 17.1	\$8.74		\$4.37	11 U.S.C. § 522(d)(5)	
Line Holli Schedule AVB. 17.1			100% of fair market value, up to any applicable statutory limit		
401K: FleetPride 401K Line from Schedule A/B: 21.2	\$6,274.01		\$6,274.01	11 U.S.C. § 522(d)(12)	
Line Holli Schedule A/B. 21.2			100% of fair market value, up to any applicable statutory limit		
Funds Garnished from Debtors in the last 90 days by Berndt & Associates	\$5,600.58		\$5,600.58	11 U.S.C. § 522(d)(5)	
Line from Schedule A/B: 30.1			100% of fair market value, up to any applicable statutory limit		
Are you claiming a homestead exemption of more than \$170,350 (Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)  No					
Yes. Did you acquire the property covere	ed by the exemption wi	itnin 1	,215 days before you filed this case	? <i>?</i>	
□ No					

_
_
_
☐ Check if this is an
amended filing
_

## Official Form 106C

# Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify the Property You Claim as Exempt

1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.								
	☐ You are claiming state and federal nonbar	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)					
	■ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)							
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.								
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the Amount of the exemption you claim portion you own			Specific laws that allow exemption				
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.					
Dε	ebtor 2 Exemptions 2008 Chrysler Sebring 112000 miles Fair Condition	\$3,500.00		\$3,500.00	11 U.S.C. § 522(d)(2)				
	Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit					
	Common Household Goods & Furnishings with no single item	\$4,000.00		\$2,000.00	11 U.S.C. § 522(d)(3)				
	worth more than \$625.00 Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit					
	Common Electronics with no single item worth more than \$625.00	\$1,000.00		\$500.00	11 U.S.C. § 522(d)(3)				
	Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit					
	Women's Clothing, Accessories, & Shoes	\$500.00		\$500.00	11 U.S.C. § 522(d)(3)				
	Line from Schedule A/B: 11.2			100% of fair market value, up to any applicable statutory limit					
	Women's Real & Costume Jewelry Line from Schedule A/B: 12.2	\$300.00		\$300.00	11 U.S.C. § 522(d)(4)				
	LINE HOTH SCHEUUIE AVD. 12.2			100% of fair market value, up to any applicable statutory limit					

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 3 of 4

	Brief description of the property and line on Schedule A/B that lists this property	Current value of the Amportion you own		ount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
	2 dogs Line from Schedule A/B: 13.1	\$2.00		\$1.00	11 U.S.C. § 522(d)(3)	
				100% of fair market value, up to any applicable statutory limit		
	Cash Line from Schedule A/B: 16.1	\$10.00		\$5.00	11 U.S.C. § 522(d)(5)	
	Ellie II olii osii oddio 772. 1011			100% of fair market value, up to any applicable statutory limit		
	Checking: Huntington Bank Line from Schedule A/B: 17.1	\$8.74		\$4.37	11 U.S.C. § 522(d)(5)	
	Ellie Holli Genedale PVB.			100% of fair market value, up to any applicable statutory limit		
	401K: State of Michigan 401K	\$1,232.74		\$1,232.74	11 U.S.C. § 522(d)(12)	
	Zino nom osmodalo 772. <b>Zini</b>			100% of fair market value, up to any applicable statutory limit		
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every  No			led on or after the date of adjustme	nt.)	
	Yes. Did you acquire the property cover	ed by the exemption wi	thin 1	,215 days before you filed this case	?	
	□ No □ Yes					
	☐ Yes					

Debtor 1	mation to identify yοι	ır case:			
	Nathan Edmond	d Curtis			
	First Name	Middle Name Last Name		•	
Debtor 2	Lisa Marie-Raps	son Curtis			
(Spouse if, filing)	First Name	Middle Name Last Name			
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT OF MICHIGAN			
Case number _					
(if known)				_	if this is an
				ameno	led filing
Official Forr	m 106D				
		W O O			
Schedule	D: Creditors	Who Have Claims Secure	d by Propert	У	12/15
s needed, copy th	e Additional Page, fill it	If two married people are filing together, both are edout, number the entries, and attach it to this form. O			
number (if known)		. •			
	s have claims secured by				
	k this box and submit t	his form to the court with your other schedules. Y	ou have nothing else t	to report on this form.	
Yes. Fill i	n all of the information	below.			
Part 1: List A	All Secured Claims				
2. List all secured	I claims. If a creditor has i	more than one secured claim, list the creditor separately	, Column A	Column B	Column C
for each claim. If r	more than one creditor has	a particular claim, list the other creditors in Part 2. As	Amount of claim Do not deduct the	Value of collateral	Unsecured
much as possible,	list the claims in alphabeti	cal order according to the creditor's name.	value of collateral.	that supports this claim	portion If any
2.1 Ally Fina	ncial	Describe the property that secures the claim:	\$11,809.00	\$10,000.00	\$1,809.00
Creditor's Nam	ne	2010 GMC Acadia 110000 miles Fair Condition			
		1 4 0 0 1 4			
Attn: Bar	nkruptcy Dept	As of the date you file, the claim is: Check all that			
Attn: Bar Po Box 3	80901	As of the date you file, the claim is: Check all that apply.			
Attn: Bar Po Box 3 Blooming	80901 gton, MN 55438	As of the date you file, the claim is: Check all that apply.  Contingent			
Attn: Bar Po Box 3 Blooming	80901	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated			
Attn: Bar Po Box 3 Blooming	gton, MN 55438 et, City, State & Zip Code	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed			
Attn: Bar Po Box 3 Blooming Number, Stree	gton, MN 55438 et, City, State & Zip Code	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.	cured		
Attn: Bar Po Box 3 Blooming	gton, MN 55438 et, City, State & Zip Code	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed	cured		
Attn: Bar Po Box 3 Blooming Number, Stree Who owes the d Debtor 1 only	80901 gton, MN 55438 et, City, State & Zip Code ebt? Check one.	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or se	cured		
Attn: Bar Po Box 3 Blooming Number, Stree  Who owes the d Debtor 1 only Debtor 2 only Debtor 1 and D	80901 gton, MN 55438 et, City, State & Zip Code ebt? Check one.	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or se car loan)	cured		
Attn: Bar Po Box 3 Blooming Number, Stree  Who owes the d Debtor 1 only Debtor 2 only Debtor 1 and D	80901 gton, MN 55438 et, City, State & Zip Code ebt? Check one.	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or se car loan) Statutory lien (such as tax lien, mechanic's lien)	cured		

8354

Last 4 digits of account number

Active

Date debt was incurred 4/17/19

Debtor 1	Nathan Ed	lmond Curtis			Cas	e number (if known)		
	First Name	Middle N	lame	Last Name				
Debtor 2	Lisa Marie	-Rapson Cur	tis					
	First Name	Middle N		Last Name				
S Fre	edom Mort	gage						
コンフィ	rporation	0 0	Describe the proper	ty that secures the c	laim:	\$126,500.00	\$150,880.00	\$0.00
	ditor's Name		32012 Bradner I	Dr. Warren, MI 48	8088			
			Macomb County	•				
Δti	n: Bankrup	tcv						
	Box 50428	,	As of the date you fi	le, the claim is: Check	all that			
	dianapolis, I	N 46250	apply.					
			Contingent					
Num	nber, Street, City, S	state & Zip Code	Unliquidated					
			Disputed					
Who owe	es the debt? O	heck one.	Nature of lien. Chec					
Debtor	r 1 only		An agreement you	made (such as mortg	age or secure	d		
☐ Debtor	r 2 only		car loan)					
☐ Debto	r 1 and Debtor 2	only!	☐ Statutory lien (suc	h as tax lien, mechani	c's lien)			
		otors and another	☐ Judgment lien from		,			
	cif this claim re		Other (including a					
	nunity debt	natoo to a	— outor (including a	Inglit to ollooty				
	,							
		Opened						
		04/16 Last						
		Active						
Date debt	t was incurred	3/16/19	Last 4 digits of	of account number	8766			
			<del>_</del>					
Add the	dollar value o	f vour entries in (	Column A on this page.	Write that number h	ere.	\$138,309	00	
		•	the dollar value totals					
	at number her		and donar value totals	un pages.		\$138,309	.00	

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

Fill in th	is information to identify your case:				
Debtor 1	Nathan Edmond Curtis	3			
	First Name	Middle Name Last Name			
Debtor 2	Lisa Marie-Rapson Cu				
(Spouse if, t	iling) First Name	Middle Name Last Name			
United S	tates Bankruptcy Court for the: EAS	STERN DISTRICT OF MICHIGAN			
Coop nu	mh a r				
Case nur	inder			ПС	Check if this is an
				_	mended filing
Sched Be as com	plete and accurate as possible. Use Part	Have Unsecured Claims  1 for creditors with PRIORITY claims and			
Schedule ( Schedule I left. Attach name and	G: Executory Contracts and Unexpired Let Creditors Who Have Claims Secured be the Continuation Page to this page. If you case number (if known).	ould result in a claim. Also list executory of eases (Official Form 106G). Do not include y Property. If more space is needed, copy bu have no information to report in a Part,	any creditors with partially se the Part you need, fill it out, no	cured claims umber the en	that are listed in tries in the boxes on the
Part 1:	List All of Your PRIORITY Unsecur				
_	y creditors have priority unsecured clain	ns against you?			
_	o. Go to Part 2.				
☐ Ye					
Part 2:	List All of Your NONPRIORITY Uns	secured Claims			
3. Do ar	y creditors have nonpriority unsecured o	claims against you?			
	b. You have nothing to report in this part. Sul	bmit this form to the court with your other sch	edules.		
■ Ye	es.				
unsec	sured claim, list the creditor separately for each one creditor holds a particular claim, list the content of t	n the alphabetical order of the creditor when the claim. For each claim listed, identify what other creditors in Part 3.If you have more than	type of claim it is. Do not list clair	ms already inc	cluded in Part 1. If more
					Total claim
	Associates in Family Practice,				
4.1 <b>F</b>	PLLC	Last 4 digits of account number	3164		\$260.00
4	Ionpriority Creditor's Name 12755 Mound Rd	When was the debt incurred?	4-30-18		_
	Sterling Heights, MI 48314  Jumber Street City State Zip Code	As of the date you file, the claim	is: Chack all that apply		
	Who incurred the debt? Check one.	As of the date you file, the claim	is. Check all that apply		
_	☐ Debtor 1 only	Contingent			
_	Debtor 2 only	Contingent			
	_	Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecure	d claim:		
_	At least one of the debtors and another	Object to a second	u Ciailli.		
c	☐ Check if this claim is for a community	☐ Obligations arising out of a sepa	aration agreement or divorce that	t you did not	
_	s the claim subject to offset?	report as priority claims			
	No	☐ Debts to pension or profit-sharing	•		
[	Yes	Other. Specify Medical De	bt		

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 15

Debtor 2	Nathan Edmond Curtis Lisa Marie-Rapson Curtis		Case number (if known)	
	Bernard Ball, LMSW	Last 4 digits of account number	69bb	\$40.00
	Nonpriority Creditor's Name 12200 E. 13 Mile, STE 150 Warren, MI 48093	When was the debt incurred?	12/31/2018	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify Medical Bil	<u> </u>	
	Biotech Clinical Laboratory Nonpriority Creditor's Name	Last 4 digits of account number	6963	\$184.01
	25775 Meadowbrook Novi, MI 48375	When was the debt incurred?	6-1-2018	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify Medical Bil	<u> </u>	
	Capital Accounts	Last 4 digits of account number	1666	\$559.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 140065	When was the debt incurred?	Opened 12/15	
	Nashville, TN 37214			
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Collection	Attorney Kerri Gustafson Dds	

	Lisa Marie-Rapson Curtis		Case number (if known)	
4.5	Capital One	Last 4 digits of account number	3345	\$2,602.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285	When was the debt incurred?	Opened 05/11 Last Active 7/04/16	
	Salt Lake City, UT 84130  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.6	Cavalry Portfolio Services  Nonpriority Creditor's Name	Last 4 digits of account number	2810	\$3,010.00
	Attn: Bankruptcy Department 500 Summit Lake Ste 400 Valhalla, NY 10595	When was the debt incurred?	Opened 03/17	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	· ·	Attorney Synchrony Bank	
	Li Tes	Other. Specify Confection I	Attorney Synchrony Bank	
4.7	Chrstn Fn Cu Nonpriority Creditor's Name	Last 4 digits of account number	7666	\$1,554.00
	Attn:Bankruptcy Dept 18441 Utica Rd Roseville, MI 48066	When was the debt incurred?	Opened 11/11 Last Active 1/25/19	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other Specify Credit Card	l	
		- Other opening		•

	r 1 Nathan Edmond Curtis r 2 Lisa Marie-Rapson Curtis		Case number (if known)	
4.8	Comenity Bank/Victoria Secret	Last 4 digits of account number	8263	\$500.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 182125	When was the debt incurred?	Opened 10/26/16 Last Active 1/20/17	••••
	Columbus, OH 43218  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	$\square$ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	Other. Specify Charge Acc	count	
4.9	Comenitybank/Meijer Nonpriority Creditor's Name	Last 4 digits of account number	9004	\$200.00
	Attn: Bankruptcy Po Box 182273 Columbus, OH 43218	When was the debt incurred?	Opened 6/15/15 Last Active 2/17/17	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	
4.1	Congress Collection	Last 4 digits of account number	4556	\$525.00
	Nonpriority Creditor's Name 28552 Orchard Lake Road Farmington Hills, MI 48334	When was the debt incurred?	Opened 11/16	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	— INO		Attorney Macomb	
	□Yes	Other. Specify Gastroente		

Credence Resource Management	Last 4 digits of account number	6315	\$1,187.00
Nonpriority Creditor's Name 17000 Dallas Parkway Suite 204	When was the debt incurred?	Opened 12/18	<b>V</b> 1,11111
Dallas, TX 75248  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	ng plans, and other similar debts	
Yes	Other. Specify Collection	Attorney T-Mobile	
Eastpointe Radiologist, PC Nonpriority Creditor's Name	Last 4 digits of account number	0700	\$21.06
36175 Harper Ave Clinton Township, MI 48035	When was the debt incurred?	1-30-2018	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Medical Bil	<u> </u>	
ERC/Enhanced Recovery Corp	Last 4 digits of account number	8667	\$2,058.00
Nonpriority Creditor's Name Attn: Bankruptcy	When was the debt incurred?	Opened 02/19	
8014 Bayberry Road			
Jacksonville, FL 32256  Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	,		
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
		Attorney Sprint	

Schedule E/F: Creditors Who Have Unsecured Claims

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Henry Ford Health System	Last 4 digits of account number	2933	\$2,434.63
Nonpriority Creditor's Name PO Box 553920 Detroit, MI 48255	When was the debt incurred?	1-3-2018	
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	ng plans, and other similar debts	
☐ Yes	Other. Specify Medical Bil	<u> </u>	
I C System Inc	Last 4 digits of account number	7637	\$354.00
Nonpriority Creditor's Name	_	0	
Attn: Bankruptcy Po Box 64378	When was the debt incurred?	Opened 11/18	
St Paul, MN 55164			
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	ng plans, and other similar debts	
■ Yes	Other. Specify Collection		
	- Other. Specify		
J.J. Marshall & Associates  Nonpriority Creditor's Name	Last 4 digits of account number	7722	\$252.00
Attn: Bankruptcy 28820 Mound Rd	When was the debt incurred?	Opened 6/08/18	
Warren, MI 48092 Number Street City State Zip Code	As of the date you file, the claim i	is: Chock all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim	от спеск ан так арру	
Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ At least one or the debtors and another ☐ Check if this claim is for a community	Student loans		
debt	_	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	and the state of t	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify Medical		

Schedule E/F: Creditors Who Have Unsecured Claims

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2 Lisa Marie-Rapson Curtis		Case number (if known)	
J.J. Marshall & Associates	Last 4 digits of account number	7721	\$87.
Nonpriority Creditor's Name Attn: Bankruptcy 28820 Mound Rd Warren, MI 48092	When was the debt incurred?	Opened 06/18	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Collection	Attorney Knollwood Dental Care	
LJ Ross Associates	Last 4 digits of account number	8096	\$2,424.
Nonpriority Creditor's Name			
4 Universal Way Po Box 6099	When was the debt incurred?	Opened 08/18	
Jackson, MI 49204  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?		aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify Collection System	Attorney Henry Ford Health	
Medical Resources Group	Last 4 digits of account number	8209	\$70.
Nonpriority Creditor's Name Attn #14129E	When was the debt incurred?	1-3-19	<u> </u>
PO Box 14000 Belfast, ME 04915-4033 Number Street City State Zip Code	— As of the data you file the claim	in Ohada all that and h	
Who incurred the debt? Check one.	As of the date you file, the claim	в. Спеск ан тат арру	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharir	og plane, and other similar debte	
■ No			
Yes	Other. Specify Medical Bil	I	

	Lisa Marie-Rapson Curtis		Case number (if known)	
4.2	Midland Funding	Last 4 digits of account number	0741	\$2,479.00
	Nonpriority Creditor's Name 2365 Northside Dr Ste 300 San Diego, CA 92108	When was the debt incurred?	Opened 06/17	
-	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other. Specify Factoring (Bank	Company Account Comenity	
4.2	Midland Funding	Last 4 digits of account number	5086	\$438.00
	Nonpriority Creditor's Name 2365 Northside Dr Ste 300 San Diego, CA 92108	When was the debt incurred?	Opened 09/17	
	Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Bank	Company Account Comenity	
4.2	Midland Funding LLC Nonpriority Creditor's Name	Last 4 digits of account number	0684	\$787.07
	PO BOX 2083 Warren, MI 48090	When was the debt incurred?	6-1-2016	
-	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Collection	for Citi bank	

Midwest Receivable Sol		9559	\$52.00
Nonpriority Creditor's Name	Last 4 digits of account number		<b>Ψ32.00</b>
Attn: Bankruptcy 2323 Gull Rd, Ste E Kalamazoo, MI 49048	When was the debt incurred?	Opened 09/15	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other. Specify  Collection A Centers	Attorney Binson S Home Health	
Minuteclinic of Michigan	Last 4 digits of account number	1658	\$35.00
Nonpriority Creditor's Name Option 2 PO Box 8452 Rolfort ME 04045	When was the debt incurred?	1-18-18	
Belfast, ME 04915  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
□ Yes	■ Other. Specify Medical Bil	<u> </u>	
Nordstrom FSB Nonpriority Creditor's Name	Last 4 digits of account number	0186	\$358.00
Attn: Bankruptcy Po Box 6555 Englewood, CO 80155	When was the debt incurred?	Opened 02/15 Last Active 6/13/16	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt	<ul><li>☐ Student loans</li><li>☐ Obligations arising out of a sepa</li></ul>	ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	•	
No	Debts to pension or profit-sharing		
☐ Yes	Other. Specify Credit Card	l	

Debt	or 2 Lisa Marie-Rapson Curtis		Case number (if known)	
4.2 6	Paramount Recovery Systems LP	Last 4 digits of account number	0015	\$150.00
	Nonpriority Creditor's Name PO Box 1937	When was the debt incurred?	6-1-2016	
	Southgate, MI 48195 Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Medical Bil	<u> </u>	
4.2	Pathology Specialists of SE MI	Last 4 digits of account number	5933	\$139.05
	Nonpriority Creditor's Name PO Box 72572	When was the debt incurred?	12-18-18	
	Cleveland, OH 44192-0002  Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.	,		
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	ng plans, and other similar debts	
	Yes	Other. Specify Medical Bil		
4.2	Portfolio Recovery	Last 4 digits of account number	7174	\$3,586.00
0	Nonpriority Creditor's Name			. ,
	Po Box 41021 Norfolk, VA 23541	When was the debt incurred?	Opened 02/17 Last Active 7/16/18	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	

■ No

☐ Yes

Schedule E/F: Creditors Who Have Unsecured Claims

 $\square$  Debts to pension or profit-sharing plans, and other similar debts

Premier Vascular Care PC	Last 4 digits of account number	9680	\$22.0
Nonpriority Creditor's Name 1701 South Blvd East Suite B75 Rochester, MI 48307-6118	When was the debt incurred?	5-1-2018	
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	□ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Medical Bill	<u> </u>	
Prosper Funding LLC	Last 4 digits of account number	9032	\$13,444.6
Nonpriority Creditor's Name	Last 4 digits of account number		<b>4.0,</b>
221 Main Street Suite 300	When was the debt incurred?	Opened 12/15 Last Active 5/16/16	
San Francisco, CA 94105 Number Street City State Zip Code	As of the data you file the claim i	er Objectivellithet englis	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	Пол		
_	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured	1 claim:	
At least one of the debtors and another	Student loans	a diami.	
☐ Check if this claim is for a community debt	_	ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	■ Other. Specify Unsecured		
Receivables Management Partners		0070	
(RMP)	Last 4 digits of account number	3372	\$239.0
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 13129	When was the debt incurred?	Opened 08/15	
Lansing, MI 48901			
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
□ Yes	Collection A Other. Specify Physician	Attorney Emergency Department	

(RN		Last 4 digits of account number	0741	\$51.0
Atti	priority Creditor's Name n: Bankruptcy Box 13129	When was the debt incurred?	Opened 06/16	
	nsing, MI 48901			
Num	nber Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
	o incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
debt Is th	t ne claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
ΠY	′es	Other. Specify Collection	Attorney Macomb Anesthesia Pc	
	ceivables Preformance			40.000
	nagement LLC	Last 4 digits of account number	<u>2691</u>	\$2,066.0
PO	priority Creditor's Name Box 1548 nnwood, WA 98046	When was the debt incurred?	7-30-18	
	ber Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who	incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
debt Is th	t ne claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□ Y	′es	Other. Specify Collecting	for Sprint	
Sch	neer, Green & Burke Co. LPA	Last 4 digits of account number	0348	\$125.4
	priority Creditor's Name			•
	Box 1312	When was the debt incurred?	7-1-2018	
	edo, OH 43603-1312 her Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
	o incurred the debt? Check one.	As of the date you me, the claim	S. Check all that apply	
_	Debtor 1 only	☐ Contingent		
_	Debtor 2 only	☐ Unliquidated		
_	Debtor 1 and Debtor 2 only	☐ Disputed		
_	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
		☐ Student loans		
debt	Check if this claim is for a community t	_	aration agreement or divorce that you did not	
Is th	ne claim subject to offset?	report as priority claims	and the state of t	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	⁄es	Other. Specify Medical Bil		

Schedule E/F: Creditors Who Have Unsecured Claims

Page 12 of 15

SJP Laboratory	Last 4 digits of account number	8011	\$55.00
Nonpriority Creditor's Name 8085 Rivers Ave. Suite 100 Charleston, SC 29406	When was the debt incurred?	7-18-18	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Medical bil	<u> </u>	
Sterling Dental	Last 4 digits of account number	8462	\$62.00
Nonpriority Creditor's Name 13205 E. 14 Mile 18312	When was the debt incurred?	2-27-18	
Sterling Heights, MI 48312	_		
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	Пол		
Debtor 2 only	☐ Contingent☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ Debtor Fand Debtor 2 only ☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify Medical Bil	<u> </u>	
Synchrony Bank	Last 4 digits of account number	8270	\$250.00
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060	When was the debt incurred?	Opened 12/14 Last Active 6/15/16	
Orlando, FL 32896  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	■ Other. Specify Charge Acc	count	

<sup>12</sup> Lisa Marie-Rapson Curtis		Case number (if known)			
Synchrony Bank/Care Credit	Last 4 digits of account number	2731	\$1,200.		
Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 07/15 Last Active 7/04/16			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply			
■ Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
No	Debts to pension or profit-sharing	g plans, and other similar debts			
Yes	Other. Specify Charge Acc	count			
Target	Last 4 digits of account number	2823	\$3,401.		
Nonpriority Creditor's Name			Ψο, το τ		
Attn: Bankruptcy		Opened 05/16 Last Active			
Po Box 9475	When was the debt incurred?	10/11/16			
Minneapolis, MN 55440  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply			
Debtor 1 only	O continuent				
■ Debtor 2 only	☐ Contingent				
_ ′	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured	d alaim.			
At least one of the debtors and another	Student loans	d claim:			
☐ Check if this claim is for a community debt	<u></u>				
Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not			
■ No	<u>-</u> ' ' '	g plans, and other similar debts			
□ Yes	□ Debts to pension or profit-sharing plans, and other similar debts  ■ Other. Specify Credit Card				
Wf/home Pr	Last 4 digits of account number	2211	\$1,697.		
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 51193	When was the debt incurred?	Opened 07/13 Last Active 7/17/16			
Los Angeles, CA 90051					
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply			
■ Debtor 1 only	☐ Contingent				
☐ Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt		ration agreement or divorce that you did not			
Is the claim subject to offset?	report as priority claims				
No	Debts to pension or profit-sharin				
☐ Yes	Other. Specify Credit Card				

Part 3: List Others to Be Notified About a Debt That You Already Listed

Page 14 of 15

Schedule E/F: Creditors Who Have Unsecured Claims

Official Form 106 E/F

Debtor 1 Nathan Edmond Curtis					
Debtor 2 Lisa Marie-Rapson Curtis		Case number (if known)			
is trying to collect from you for a debt you o	we to someone else, list the original creebts that you listed in Parts 1 or 2, list	bt that you already listed in Parts 1 or 2. For example, if a collection agency editor in Parts 1 or 2, then list the collection agency here. Similarly, if you the additional creditors here. If you do not have additional persons to be			
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?				
Berndt & Associates PC	Line <b>4.30</b> of ( <i>Check one</i> ):	☐ Part 1: Creditors with Priority Unsecured Claims			
30500 Van Dyke Ste. 702 Warren, MI 48093		■ Part 2: Creditors with Nonpriority Unsecured Claims			
•	Last 4 digits of account number				
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?				
Knollwood Dental Care	Line <b>4.17</b> of ( <i>Check one</i> ):	☐ Part 1: Creditors with Priority Unsecured Claims			
35409 Schoenherr Rd Sterling Heights, MI 48312-4258		■ Part 2: Creditors with Nonpriority Unsecured Claims			
Oterming Fiergrits, im 40012 4200	Last 4 digits of account number				
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?				
Stillman Law Office	Line <b>4.20</b> of ( <i>Check one</i> ):	☐ Part 1: Creditors with Priority Unsecured Claims			
30057 Orchard Lake Suite 200		■ Part 2: Creditors with Nonpriority Unsecured Claims			
Farmington Hills, MI 48334	Last 4 digits of account number				

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total				
claims rom Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
om Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 48,958.99
	6i.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 48,958.99

ation to identify your	case:				
Nathan Edmond (	Curtis				
First Name	Middle Name	Last Name			
Lisa Marie-Rapso	n Curtis				
First Name	Middle Name	Last Name			
kruptcy Court for the:	EASTERN DISTRICT C	PF MICHIGAN			
					Check if this is an amended filing
	Nathan Edmond (First Name Lisa Marie-Rapso First Name	Lisa Marie-Rapson Curtis First Name Middle Name	Nathan Edmond Curtis First Name Middle Name Last Name  Lisa Marie-Rapson Curtis First Name Middle Name Last Name	Nathan Edmond Curtis First Name Middle Name Last Name Lisa Marie-Rapson Curtis First Name Middle Name Last Name	Nathan Edmond Curtis First Name Middle Name Last Name  Lisa Marie-Rapson Curtis First Name Middle Name Last Name  kruptcy Court for the: EASTERN DISTRICT OF MICHIGAN

### Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with	whom you have the r, Street, City, State and ZIP	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3	Oity		Olate	Zii Oodo	
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.4			<u> </u>		
	Name				_
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.5	City		Olato	211 0000	
-	Name				_
	Number	Street			_
	City		State	ZIP Code	

Official Form 106G

Fill in this in	formation to identify y	our case:			
Debtor 1	Nathan Edmo				
Dobtor 2	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	Lisa Marie-Ra First Name	Middle Name	Last Name		
United States	Bankruptcy Court for th	e: EASTERN DISTRICT C	F MICHIGAN		
Case number					☐ Check if this is an amended filing
	Form 106H le H: Your Co	odebtors			12/15
people are fill fill it out, and	ing together, both are number the entries in	equally responsible for supp	olying correct information the Additional Page to t	n. If more space is n	ate as possible. If two married needed, copy the Additional Page, p of any Additional Pages, write
1. Do yo	u have any codebtors?	(If you are filing a joint case,	do not list either spouse as	a codebtor.	
□ No ■ Yes					
		you lived in a community pr ana, Nevada, New Mexico, Pu			y states and territories include
	o to line 3.				
☐ Yes. □	Oid your spouse, former	spouse, or legal equivalent live	e with you at the time?		
in line 2	again as a codebtor of 6D), Schedule E/F (Off	nly if that person is a guaran	tor or cosigner. Make su	re you have listed the	g with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	lumn 1: Your codebtor ne, Number, Street, City, State a	nd ZIP Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
22	resa Curtis 323 Dale Allen nton Township, MI	<b>48035</b>		■ Schedule D, li □ Schedule E/F □ Schedule G _ Ally Financial	

Fill	in this information to identify	your ca	se:						
De	btor 1 Natha	n Edm	ond Curtis						
1 -	btor 2 Lisa N	larie-R	apson Curtis						
Un	ited States Bankruptcy Court	t for the:	EASTERN DISTRICT	OF MIC	CHIGAN	_			
(If k	se number nown)  fficial Form 106I			-			13 income	d filing ent showing postpetition chapter as of the following date:	
	chedule I: Your						MM / DD/ Y	YYY 12/1!	
spo atta	use. If you are separated a	ind youi form. C	spouse is not filing wi	th you,	do not include inform	ation a	bout your spo	ude information about your buse. If more space is needed, known). Answer every question	۱.
1.	Fill in your employment information.			Debte	or 1		Debtor 2	or non-filing spouse	
	If you have more than one attach a separate page wit		Employment status	<b>■</b> Er	nployed		■ Emplo	pyed	
	information about addition		p.o,	□ No	ot employed		☐ Not e	mployed	
	employers.		Occupation	Outs	ide sales		On med	lical leave	_
	Include part-time, seasona self-employed work.	al, or	Employer's name	Fleet	t Pride		Van Dy	ke Public Schools	
	Occupation may include st or homemaker, if it applies		Employer's address	Suite	E. Las Colinas e 400 g, TX 75039			Macarthur Blvd , MI 48089	
			How long employed t	here?	1.5 Years		1	.5 Years	
Pa	rt 2: Give Details Abo	out Mon	thly Income						
	imate monthly income as o		te you file this form. If	you hav	e nothing to report for a	ny line,	write \$0 in the	space. Include your non-filing	
	ou or your non-filing spouse he space, attach a separate s			mbine t	he information for all en	ployers	s for that perso	n on the lines below. If you need	
						For	Debtor 1	For Debtor 2 or non-filing spouse	

4,000.01

0.00

+\$

List monthly gross wages, salary, and commissions (before all payroll 2. deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. Calculate gross Income. Add line 2 + line 3. 4,000.01

0.00

0.00

0.00

Debtor 1 Nathan Edmond Curtis
Lisa Marie-Rapson Curtis

Case number (if known)

						For	Debtor 1		or Debtor 2 or on-filing spous	
	Сору	/ line 4 here			4.	\$	4,000.01	\$	<u> </u>	00
_							<u> </u>	_		
5.	List a	all payroll deduc	tions:							
	5a.		and Social Secu	-	5a.	\$	410.58	\$_		00
	5b.	•	tributions for ret	•	5b.	\$_	0.00	\$_		00
	5c.	-	ributions for reti	•	5c.	\$_	160.01	\$_		00_
	5d.		ments of retiren	nent fund loans	5d.	\$_	0.00	\$_		00_
	5e.	Insurance			5e.	\$_	879.08	\$_		00
	5f.	Domestic supp	ort obligations		5f.	\$_	0.00	\$_		00
	5g.	Union dues	0 '' 11		5g.	\$_	0.00	\$_		00
	5h.			e and Disibility	5h.+	\$_	41.47	+ \$_	0.0	00
6.				s 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	1,491.14	\$_		00
7.	Calc	ulate total month	ily take-home pa	y. Subtract line 6 from line 4.	7.	\$	2,508.87	\$_	0.0	00_
8.	List a 8a.	profession, or f Attach a stateme	m rental property farm ent for each property and necessary	ed: y and from operating a business, erty and business showing gross business expenses, and the total	8a.	\$	0.00	\$	0.	00
	8b.	Interest and div			8b.	\$	0.00	\$		00
	8c.	regularly received include alimony,	re	you, a non-filing spouse, or a deper child support, maintenance, divorce ont.	ndent 8c.	\$	0.00	\$	0.	00
	8d.	Unemployment	compensation		8d.	\$	0.00	\$	0.0	00
	8e.	Social Security			8e.	\$	0.00	\$	0.0	00
	8f.	Include cash ass that you receive	sistance and the v	hat you regularly receive /alue (if known) of any non-cash assis Imps (benefits under the Supplementa housing subsidies.		\$_	0.00	\$	0.	00
	8g.	Pension or retir	rement income		8g.	\$	0.00	\$	0.0	00
	8h.	Other monthly	income. Specify:	Average monthly net commis	sion 8h.+	\$	2,300.00	+ \$ _	0.	00
9.	Add	all other income	. Add lines 8a+8b	o+8c+8d+8e+8f+8g+8h.	9.	\$	2,300.00	\$_	0	0.00
10.	Calcı	ulate monthly inc	come. Add line 7	+ line 9.	10. \$		4,808.87 + \$		0.00 = \$	4,808.87
		•		nd Debtor 2 or non-filing spouse.			-1,000.01		<del></del>	4,000.01
11.	State Include other	e all other regular de contributions fr friends or relative ot include any am	r contributions to com an unmarried es.	o the expenses that you list in Sche partner, members of your household, luded in lines 2-10 or amounts that are	, your depend					0.00
12.		that amount on the		line 10 to the amount in line 11. The chedules and Statistical Summary of						4,808.87
10	De ···	ou ovnoct on !	rooco or door	on within the year after year file this	form?					nbined hthly income
13.	□	No.	rease or decreas	se within the year after you file this	ioriii?					
		Yes. Explain:	Joint Debtor	was put on medical leave for th	ne forseeab	le fu	ture.			

Debtor 1   Nathan Edmond Curtis   Check if this is:   An amended filing   A supplement showing postpet   13 expenses as of the following   It is a Marie-Rapson Curtis   An amended filing   A supplement showing postpet   13 expenses as of the following   It is a marie-Rapson Curtis   It is a marie-Rapson Curtis   An amended filing   A supplement showing postpet   13 expenses as of the following   It is a marie-Rapson Curtis   It is a marie-Rapson Curt	
Debtor 2 (Spouse, if filing)  United States Bankruptcy Court for the: EASTERN DISTRICT OF MICHIGAN  Case number (If known)  Official Form 106J  Schedule J: Your Expenses	
Debtor 2 Lisa Marie-Rapson Curtis  United States Bankruptcy Court for the: EASTERN DISTRICT OF MICHIGAN  Case number (If known)  Official Form 106J  Schedule J: Your Expenses	
Case number (If known)  Official Form 106J  Schedule J: Your Expenses	
Official Form 106J Schedule J: Your Expenses	
Schedule J: Your Expenses	
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplyin	12/15
information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name number (if known). Answer every question.  Part 1: Describe Your Household	
1. Is this a joint case?	
□ No. Go to line 2.	
■ Yes. Does Debtor 2 live in a separate household?	
<ul><li>■ No</li><li>□ Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.</li></ul>	
2. Do you have dependents? ☐ No	
Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent Dependent's relationship to Debtor 2. Dependent's age Does do live with	ependent h you?
Do not state the	
dependents names.  Son 7  Yes	
□ No Son 8 ■ Yes	
Daughter 11 ■ Yes	i
3. Do your expenses include expenses of people other than yourself and your dependents? ☐ Yes ☐	
Part 2: Estimate Your Ongoing Monthly Expenses	
Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 ca expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form applicable date.	
Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 106I.)  Your expenses	
4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  4. \$ 1,10	9.56
If not included in line 4:	
4a. Real estate taxes 4a. \$	0.00
	0.00
	0.00 0.00

Additional mortgage payments for your residence, such as home equity loans

0.00

1110 100	and to your monany not moome.	
For example, do	et an increase or decrease in your expenses within the year after you file this you expect to finish paying for your car loan within the year or do you expect your mortgage ne terms of your mortgage?	
■ No. □ Yes.	Explain here:	
<b>—</b> 100.		

Fill in this infor	mation to identify your	case:					
Debtor 1	Nathan Edmond	Curtis				]	
	tes Bankruptcy Court for the: EASTERN DISTRICT OF MICHIGAN  Der Check if this is an amended filing  Form 106Dec						
Debtor 2	Lisa Marie-Rapso	on Curtis					
(Spouse if, filing)	First Name	Middle Name	Las	t Name			
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT OF	MICHIGA	.N			
Case number							
(if known)						_	
If two married pe You must file thi obtaining money	eople are filing togethe s form whenever you f y or property by fraud i	r, both are equally respons ile bankruptcy schedules o n connection with a bankru	sible for s	upplying	correct information. ules. Making a false sta		
Sigi	n Below						
Did you pa	y or agree to pay some	eone who is NOT an attorne	ey to help	you fill o	out bankruptcy forms?		
■ No							
☐ Yes. N	Name of person					nkruptcy Petition Pre on, and Signature (O	
	lity of perjury, I declare e true and correct.	that I have read the summa	ary and s	chedules	filed with this declarat	ion and	
X /s/ Nat	han Edmond Curtis		х	/s/ Lisa	Marie-Rapson Curti	s	
	n Edmond Curtis				arie-Rapson Curtis	-	
Signatu	re of Debtor 1				e of Debtor 2		
Date _	May 7, 2019			Date N	May 7, 2019		

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules** 

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Best Case Bankruptcy

		nation to identify you				
Debto	or 1	Nathan Edmond First Name	Middle Name	Last Name		
Debto	or 2	Lisa Marie-Raps				
(Spouse	e if, filing)	First Name	Middle Name	Last Name		
United	d States Ba	nkruptcy Court for the:	EASTERN DISTRICT OF	MICHIGAN		
Case (if know	number _				-	Check if this is an mended filing
Stat Be as inform	complete a	nd accurate as possi	attach a separate sheet to	are filing together, both are	ankruptcy equally responsible for sup v additional pages, write you	
Part 1	Give D	etails About Your Ma	arital Status and Where You	Lived Before		
1. W	/hat is you	current marital statu	ıs?			
<b>■</b>	■ Married ■ Not mar	ried				
2. D	uring the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No ] Yes. Lis	t all of the places you l	ived in the last 3 years. Do no	ot include where you live nov	<i>i</i> .	
E	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	dress:	Dates Debtor 2 lived there
					ity property state or territory ico, Texas, Washington and W	
•	■ No ■ Yes. Ma	ke sure you fill out <i>Scl</i>	hedule H: Your Codebtors (O	fficial Form 106H).		
Part 2	Explai	n the Sources of You	r Income			
F	ill in the tota	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part		ndar years?
	I No I Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$29,085.00	☐ Wages, commissions, bonuses, tips	\$0.00
			☐ Operating a husiness		☐ Operating a business	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	☐ Wages, commissions, bonuses, tips	\$0.00	■ Wages, commissions, bonuses, tips	\$5,828.60
	☐ Operating a business		☐ Operating a business	
For last calendar year: (January 1 to December 31, 2018)	■ Wages, commissions, bonuses, tips	\$75,868.00	☐ Wages, commissions, bonuses, tips	\$0.00
	☐ Operating a business		☐ Operating a business	
	☐ Wages, commissions, bonuses, tips	\$0.00	■ Wages, commissions, bonuses, tips	\$9,878.00
	☐ Operating a business		☐ Operating a business	
For the calendar year before that: (January 1 to December 31, 2017)	■ Wages, commissions, bonuses, tips	\$53,106.00	☐ Wages, commissions, bonuses, tips	\$0.00
	☐ Operating a business		☐ Operating a business	
	☐ Wages, commissions, bonuses, tips	\$0.00	■ Wages, commissions, bonuses, tips	\$0.00
	☐ Operating a business		☐ Operating a business	
<ul> <li>5. Did you receive any other incorning location include income regardless of whe and other public benefit payment winnings. If you are filing a joint of List each source and the gross in No</li> <li>Yes. Fill in the details.</li> </ul>	ether that income is taxable. Exa s; pensions; rental income; inter ase and you have income that y	amples of other income are a rest; dividends; money collec you received together, list it o	ted from lawsuits; royalties; ar inly once under Debtor 1.	
	Daliford		Dalitano	
	Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)
Part 3: List Certain Payments Yo	ou Made Before You Filed for	Bankruptcv		
6. Are either Debtor 1's or Debtor  No. Neither Debtor 1 no		r debts? umer debts. Consumer debts	s are defined in 11 U.S.C. § 10	01(8) as "incurred by an
During the 90 days he	efore you filed for bankruptcy, di	d you pay any creditor a tota	l of \$6.825* or more?	
□ No. Go to line		- , - a pa, an, ordanor a tota		
☐ Yes List below paid that not include	veach creditor to whom you pai creditor. Do not include paymer le payments to an attorney for the ent on 4/01/22 and every 3 year	nts for domestic support oblights bankruptcy case.	ations, such as child support a	and alimony. Also, do

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	btor 1 Nathan Edmond btor 2 Lisa Marie-Raps			Cas	se number (if known)	
			e primarily consumer del I for bankruptcy, did you pa		al of \$600 or more?	
	■ Yes Lis		lomestic support obligation			you paid that creditor. Do not Also, do not include payments to an
	Creditor's Name and Ad	dress	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	Freedom Mortgage Co Attn: Bankruptcy Po Box 50428 Indianapolis, IN 46250		Monthly	\$3,405.00	\$126,500.00	■ Mortgage □ Car □ Credit Card □ Loan Repayment □ Suppliers or vendors □ Other
	Ally Financial Attn: Bankruptcy Dep Po Box 380901 Bloomington, MN 554		Monthly	\$1,050.00	\$11,809.00	<ul> <li>□ Mortgage</li> <li>■ Car</li> <li>□ Credit Card</li> <li>□ Loan Repayment</li> <li>□ Suppliers or vendors</li> <li>□ Other</li> </ul>
7.	of which you are an officer,	ves; any general pa director, person in a sole proprietor. 1	rtners; relatives of any gen- control, or owner of 20% or	eral partners; partner r more of their votin	erships of which yo g securities; and ar	was an insider? u are a general partner; corporations ny managing agent, including one for s, such as child support and
	Insider's Name and Add	ress	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
8.	Within 1 year before you insider? Include payments on debts  No Yes. List all payments	guaranteed or cosi		ments or transfer a	any property on a	ccount of a debt that benefited an
	Insider's Name and Add	ress	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Pa	rt 4: Identify Legal Action	ns, Repossession	s, and Foreclosures			
9.	Within 1 year before you List all such matters, include modifications, and contract  No Yes. Fill in the details	ling personal injury disputes.				
	Case title Case number		Nature of the case	Court or agency		Status of the case
	Chrstn Fn Cu v Natha Curtis & Lisa Marie-R 19-8099 SC		Small Claims	37th District Co 8300 Common Warren, MI 480	Road	■ Pending □ On appeal □ Concluded

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Within 1 year before you filed for ban Check all that apply and fill in the details	kruptcy, was any of your property repossessed, foreclos	ed, garnished, attached,	seized, or levied?
□ No. Go to line 11.	s below.		
Yes. Fill in the information below.			
Creditor Name and Address	Describe the Property	Date	Value of th
Ordator Name and Address	Describe the Property	Duto	proper
	Explain what happened		
Berndt & Associates PC 30500 Van Dyke Ste. 702 Warren, MI 48093	\$5600.58 garnished from debtors bank account.	4-15-19	\$5,600.5
Waitell, Wil 40093	☐ Property was repossessed.		
	☐ Property was foreclosed.		
	■ Property was garnished.		
	$\square$ Property was attached, seized or levied.		
Midland Funding LLC PO BOX 2083 Warren, MI 48090	Case number 18-060684 Garnished from Debtors pay check in the last year.	Garnished from pay in early 2019	\$1,199.8
Warren, Wii 40090	☐ Property was repossessed.	earry 2019	
	☐ Property was foreclosed.		
	☐ Property was garnished.		
	$\square$ Property was attached, seized or levied.		
Calval SPV 1, LLC PO Box 2305	Case number 17-47707 Garnished from Debtors pay check in the last year.	Garnished from pay in	\$5,954.3
Mount Clemens, MI 48046	☐ Property was repossessed.	2018 and January of	
	☐ Property was foreclosed.	2018	
	■ Property was garnished.		
	☐ Property was attached, seized or levied.		
Calval SPV 1, LLC PO Box 2305 Mount Clemens, MI 48046	Case number 17-4071 Garnished from Debtors pay check in the last year.	Garnished from pay in 2018	\$1,582.6
mount olemens, im 40040	☐ Property was repossessed.	2010	
	☐ Property was foreclosed.		
	☐ Property was garnished.		
	☐ Property was attached, seized or levied.		

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

Describe the action the creditor took

No

☐ Yes

Amount

**Creditor Name and Address** 

Date action was

taken

	otor 1 Nathan Edmond Curtis otor 2 Lisa Marie-Rapson Curtis	Case number	(if known)	
Par	t 5: List Certain Gifts and Contributions			
13.	Within 2 years before you filed for bankrup  ■ No □ Yes. Fill in the details for each gift.	otcy, did you give any gifts with a total value of more t	han \$600 per person	?
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
14.	■ No	otcy, did you give any gifts or contributions with a total	al value of more than	\$600 to any charity?
	Yes. Fill in the details for each gift or cor	ntribution.		
	Gifts or contributions to charities that tot more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	tal Describe what you contributed	Dates you contributed	Value
Par	t 6: List Certain Losses			
	how the loss occurred	Describe any insurance coverage for the loss include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Par		.,		
16.	consulted about seeking bankruptcy or pre	ccy, did you or anyone else acting on your behalf pay eparing a bankruptcy petition? Exparers, or credit counseling agencies for services require		rty to anyone you
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	UpRight Law PLLC 79 W. Monroe St. Fifth Floor Chicago, IL 60603 peterb@phoenixfreshstart.com	Attorney Fees - \$1250 Filing Fee - \$335	Payment made in installments between 4/30/2018 - 5/2/2018	\$1,585.00
	MoneySharp Credit Counseling Inc. 222 W Merchandise Mart Plaza #1225 Chicago, IL 60654	;	5-7-19	\$10.00

17.	Within 1 year before you filed for bankruptcy, promised to help you deal with your creditors Do not include any payment or transfer that you li  No	or to make payments			r transfer any proper	ty to anyone who
	Yes. Fill in the details.					
	Person Who Was Paid Address	Description and va transferred	alue of any prop	erty	Date payment or transfer was made	Amount of payment
40	Within 2 years hefers you filed for honky inter-	, did vou cell trede e	. athamuiaa tuan	ofor only prope	autu ta anuana athau	than muanautu
18.	Within 2 years before you filed for bankruptcy transferred in the ordinary course of your bus Include both outright transfers and transfers made include gifts and transfers that you have already I No  Yes Fill in the details	siness or financial affai e as security (such as th	rs?			
	Person Who Received Transfer Address Person's relationship to you	Description and va property transferre			any property or received or debts change	Date transfer was made
	reison's relationship to you					
19.	Within 10 years before you filed for bankruptc beneficiary? (These are often called asset-prote  No  Yes. Fill in the details.		property to a s	elf-settled tru	st or similar device o	f which you are a
		Description and us			!	Data Transfer
	Name of trust	Description and va	liue of the prope	erty transferre	ea	Date Transfer was made
Par	8: List of Certain Financial Accounts, Instr	uments, Safe Deposit	Boxes, and Sto	rage Units		
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.  No  Yes. Fill in the details.					
		ast 4 digits of account number	Type of accour instrument	clo mo	te account was sed, sold, ved, or nsferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 yea	ar before you filed for	bankruptcy, any	/ safe deposit	box or other deposit	ory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acce Address (Number, State and ZIP Code)		Describe the o	contents	Do you still have it?
22.	Have you stored property in a storage unit or	place other than your	home within 1 y	ear before yo	u filed for bankruptcy	/?
	■ No					
	Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or hat to it? Address (Number, Str		Describe the o	contents	Do you still have it?
		State and ZIP Code)				

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Case number (if known)

Par	t 9:	Identify Property You Hold or Control for	Someone Else				
23.	23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.						
		No					
		Yes. Fill in the details.					
		wner's Name Idress (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	De	scribe the property	Value	
Par	t 10	Give Details About Environmental Information	ation				
For	the	purpose of Part 10, the following definitions	apply:				
	tox	vironmental law means any federal, state, or ic substances, wastes, or material into the a julations controlling the cleanup of these sul	ir, land, soil, surface water, ground	_	•		
		e means any location, facility, or property as own, operate, or utilize it, including disposal		law,	whether you now own, operate,	or utilize it or used	
		zardous material means anything an environ zardous material, pollutant, contaminant, or s		s wa	ste, hazardous substance, toxic	substance,	
Rep	ort a	all notices, releases, and proceedings that yo	ou know about, regardless of wher	n the	ey occurred.		
24.	Has	s any governmental unit notified you that you	u may be liable or potentially liable	unc	der or in violation of an environm	ental law?	
		No Yea Fill in the details					
		Yes. Fill in the details.	Carrama and al		Facing a monthly law if you	Data of matica	
		ame of site ddress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice	
25.	Have you notified any governmental unit of any release of hazardous material?						
		No Yes. Fill in the details.					
		ame of site ddress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice	
26.	Hav	ve you been a party in any judicial or adminis	strative proceeding under any envi	iron	mental law? Include settlements	and orders.	
		No Yes. Fill in the details.					
		ase Title ase Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case	
Par	t 11	Give Details About Your Business or Con	nections to Any Business				
27.	Wit	thin 4 years before you filed for bankruptcy,	did you own a business or have ar	ıy of	the following connections to an	y business?	
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time						
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)						
	☐ A partner in a partnership						
	☐ An officer, director, or managing executive of a corporation						
	☐ An owner of at least 5% of the voting or equity securities of a corporation						

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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	btor 1 Nathan Edmond Curtis btor 2 Lisa Marie-Rapson Curtis	Ca	se number (if known)
	■ No. None of the above applies. Go to  Yes. Check all that apply above and fil	Part 12. Il in the details below for each business.	
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business  Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN.  Dates business existed
28.	Within 2 years before you filed for bankrup institutions, creditors, or other parties.  ■ No □ Yes. Fill in the details below.	otcy, did you give a financial statement to a	nyone about your business? Include all financial
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued	
are with		a false statement, concealing property, or o	declare under penalty of perjury that the answers btaining money or property by fraud in connection ars, or both.
Na	Nathan Edmond Curtis than Edmond Curtis gnature of Debtor 1	/s/ Lisa Marie-Rapson Curtis Lisa Marie-Rapson Curtis Signature of Debtor 2	
Da	te May 7, 2019	Date May 7, 2019	
■ N □ \ Did	ves you pay or agree to pay someone who is no	ot an attorney to help you fill out bankrupto	y forms?
	es. Name of Person Attach the Bankro	uptcy Petition Preparer's Notice, Declaration, a	and Signature (Official Form 119).

# **United States Bankruptcy Court Eastern District of Michigan**

	Eastern District of Whengan			
		Case No.		
	Debtor(s)	Chapter	7	
	STATEMENT OF ATTORNEY FOR DEBTOR(S) PURSUANT TO F.R.BANKR.P. 2016(b)			
The undersigned, pursuant to F.R.Bankr.P. 2016(b), states that:				
The unde	ersigned is the attorney for the Debtor(s) in this case.			
The com	pensation paid or agreed to be paid by the Debtor(s) to the undersigned is: [Check or	ne]		
[ <b>X</b> ]	FLAT FEE			
A.	For legal services rendered in contemplation of and in connection with this case, exclusive of the filing fee paid	1,	250.00	
B.	Prior to filing this statement, received	1,	250.00	
C.	The unpaid balance due and payable is	-	0.00	
[]	RETAINER			
	The under The complete (X) A.  B.	Nathan Edmond Curtis Lisa Marie-Rapson Curtis  Debtor(s)  STATEMENT OF ATTORNEY FOR DEBTOR(S) PURSUANT TO F.R.BANKR.P. 2016(b)  The undersigned, pursuant to F.R.Bankr.P. 2016(b), states that: The undersigned is the attorney for the Debtor(s) in this case.  The compensation paid or agreed to be paid by the Debtor(s) to the undersigned is: [Check or [X]] FLAT FEE  A. For legal services rendered in contemplation of and in connection with this case, exclusive of the filing fee paid  B. Prior to filing this statement, received  C. The unpaid balance due and payable is	Nathan Edmond Curtis Lisa Marie-Rapson Curtis  Debtor(s)  Case No. Chapter  STATEMENT OF ATTORNEY FOR DEBTOR(S) PURSUANT TO F.R.BANKR.P. 2016(b)  The undersigned, pursuant to F.R.Bankr.P. 2016(b), states that: The undersigned is the attorney for the Debtor(s) in this case. The compensation paid or agreed to be paid by the Debtor(s) to the undersigned is: [Check one]  [X] FLAT FEE  A. For legal services rendered in contemplation of and in connection with this case, exclusive of the filing fee paid	Nathan Edmond Curtis Lisa Marie-Rapson Curtis  Debtor(s)  Case No.  Chapter  7  STATEMENT OF ATTORNEY FOR DEBTOR(S) PURSUANT TO F.R.BANKR.P. 2016(b)  The undersigned, pursuant to F.R.Bankr.P. 2016(b), states that: The undersigned is the attorney for the Debtor(s) in this case.  The compensation paid or agreed to be paid by the Debtor(s) to the undersigned is: [Check one]  [X] FLAT FEE  A. For legal services rendered in contemplation of and in connection with this case, exclusive of the filling fee paid

- 3. \$ **335.00** of the filing fee has been paid.
- 4. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: [Cross out any that do not apply.]
  - A. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
  - B. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;

agreed to pay all Court approved fees and expenses exceeding the amount of the retainer.

- C. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- D. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;

- E. Reaffirmations;
- F. Redemptions;
- G. Other:

A.

В.

- 5. By agreement with the debtor(s), the above-disclosed fee does not include the following services:
  - A. Representation of the debtor(s) in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding;

The undersigned shall bill against the retainer at an hourly rate of \$ . [Or attach firm hourly rate schedule.] Debtor(s) have

- B. Representation of the debtor(s) at Section 2004 Hearings, \$400.00 Attorney fee;
- C. Debtor(s) agrees to pay attorney fee of \$220.00 for any court appearance for which debtor is required to appear but fails to do so, or any adjournments thereof. Attorney fee shall be at an average of \$220.00 per hour for ALL OTHER POST PETITION WORK;
- D. Debtor(s) agree to reimburse attorney for all postage costs and photo copies at \$0.20 per page, plus the applicable mailing rates for all documents mailed on behalf of the debtor(s), or in furtherance of the debtor's case;
- E. Debtor(s) agrees to cooperate with request of Trustee for the production of documents and has been advised that failure to comply with Trustee's requests may result in the dismissal of the debtor's case;
- F. Debtor(s) agrees to compensate attorney at an average rate of \$220.00 per hour for any motions which are filed prior to confirmation, which require a court appearance;
- G. Attorney, at his sole discretion, may bill this case on an hourly rate, rather than agreed upon flat fee rate, if this case presents more complications than anticipated at the time of filing. This includes, but is not limited to, failure of the Debtor to properly appear for court hearings or appointments.

6.	The source of payments to the undersigned was from:				
	A.	XX	Debtor(s)' earnings, wages, compensation for services performed		
	B.		Other (describe, including the identity of payor)		

corporation, any compensation paid or to be paid except as follows: May 7, 2019 /s/ Peter A. Behrmann Dated: Attorney for the Debtor(s) Peter A. Behrmann **UpRight Law PLLC** 37699 Six Mile Suite 250 Livonia,, MI 48152 (734) 259-2947 Behrmann.peter@gmail.com /s/ Nathan Edmond Curtis /s/ Lisa Marie-Rapson Curtis

The undersigned has not shared or agreed to share, with any other person, other than with members of the undersigned's law firm or

**Nathan Edmond Curtis** Lisa Marie-Rapson Curtis Debtor Debtor

7.

### Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

#### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Ch	apter 7:	Liquidation	
	\$245	filing fee	
	\$75	administrative fee	
<u>+</u> _	\$15	trustee surcharge	
	\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the Chapter 7 Means Test Calculation (Official Form 122A-2).

If your income is above the median for your state, you must file a second form —the Chapter 7 Means Test Calculation (Official Form 122A-2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called exempt property. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on Schedule C: The Property You Claim as Exempt (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

# **United States Bankruptcy Court Eastern District of Michigan**

In re	Nathan Edmond Curtis Lisa Marie-Rapson Curtis		Case No.	
	<u>.</u>	Debtor(s)	Chapter	7
The ab	<b>VERIFI</b> ove-named Debtors hereby verify that the	CATION OF CREDITOR  the attached list of creditors is true and		of their knowledge.
Date:	May 7, 2019	/s/ Nathan Edmond Curtis Nathan Edmond Curtis Signature of Debtor		
Date:	May 7, 2019	/s/ Lisa Marie-Rapson Curtis Lisa Marie-Rapson Curtis Signature of Debtor	•	

Ally Financial Attn: Bankruptcy Dept Po Box 380901 Bloomington, MN 55438

Associates in Family Practice, PLLC 42755 Mound Rd Sterling Heights, MI 48314

Bernard Ball, LMSW 12200 E. 13 Mile, STE 150 Warren, MI 48093

Berndt & Associates PC 30500 Van Dyke Ste. 702 Warren, MI 48093

Biotech Clinical Laboratory 25775 Meadowbrook Novi, MI 48375

Capital Accounts Attn: Bankruptcy Dept Po Box 140065 Nashville, TN 37214

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Cavalry Portfolio Services Attn: Bankruptcy Department 500 Summit Lake Ste 400 Valhalla, NY 10595

Chrstn Fn Cu Attn:Bankruptcy Dept 18441 Utica Rd Roseville, MI 48066

Comenity Bank/Victoria Secret Attn: Bankruptcy Po Box 182125 Columbus, OH 43218 Comenitybank/Meijer Attn: Bankruptcy Po Box 182273 Columbus, OH 43218

Congress Collection 28552 Orchard Lake Road Farmington Hills, MI 48334

Credence Resource Management 17000 Dallas Parkway Suite 204 Dallas, TX 75248

Eastpointe Radiologist, PC 36175 Harper Ave Clinton Township, MI 48035

ERC/Enhanced Recovery Corp Attn: Bankruptcy 8014 Bayberry Road Jacksonville, FL 32256

Freedom Mortgage Corporation Attn: Bankruptcy Po Box 50428 Indianapolis, IN 46250

Henry Ford Health System PO Box 553920 Detroit, MI 48255

I C System Inc Attn: Bankruptcy Po Box 64378 St Paul, MN 55164

J.J. Marshall & Associates Attn: Bankruptcy 28820 Mound Rd Warren, MI 48092

J.J. Marshall & Associates Attn: Bankruptcy 28820 Mound Rd Warren, MI 48092 Knollwood Dental Care 35409 Schoenherr Rd Sterling Heights, MI 48312-4258

LJ Ross Associates 4 Universal Way Po Box 6099 Jackson, MI 49204

Medical Resources Group Attn #14129E PO Box 14000 Belfast, ME 04915-4033

Midland Funding 2365 Northside Dr Ste 300 San Diego, CA 92108

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Midland Funding LLC PO BOX 2083 Warren, MI 48090

Midwest Receivable Sol Attn: Bankruptcy 2323 Gull Rd, Ste E Kalamazoo, MI 49048

Minuteclinic of Michigan Option 2 PO Box 8452 Belfast, ME 04915

Nordstrom FSB Attn: Bankruptcy Po Box 6555 Englewood, CO 80155

Paramount Recovery Systems LP PO Box 1937 Southgate, MI 48195

Pathology Specialists of SE MI PO Box 72572 Cleveland, OH 44192-0002

Portfolio Recovery Po Box 41021 Norfolk, VA 23541

Premier Vascular Care PC 1701 South Blvd East Suite B75 Rochester, MI 48307-6118

Prosper Funding LLC 221 Main Street Suite 300 San Francisco, CA 94105

Receivables Management Partners (RMP) Attn: Bankruptcy Po Box 13129 Lansing, MI 48901

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Receivables Preformance Management LLC PO Box 1548
Lynnwood, WA 98046

Scheer, Green & Burke Co. LPA PO Box 1312 Toledo, OH 43603-1312

SJP Laboratory 8085 Rivers Ave. Suite 100 Charleston, SC 29406

Sterling Dental 13205 E. 14 Mile 48312 Sterling Heights, MI 48312 Stillman Law Office 30057 Orchard Lake Suite 200 Farmington Hills, MI 48334

Synchrony Bank Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/Care Credit Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896

Target Attn: Bankruptcy Po Box 9475 Minneapolis, MN 55440

Thresa Curtis 22323 Dale Allen Clinton Township, MI 48035

Wf/home Pr Attn: Bankruptcy Po Box 51193 Los Angeles, CA 90051